Foster Family Home - Corrective Action Report

Provider ID:	કાહ004	O. Specia	Complete Complete	re aprili	illering to the light	ture of a purpose	zoithe Nizadkachiya	the of the second	Selfer of analysis i	normalis observations
Home Name:	Jesusa	Sebast	ian, CNA	Tanda, Filmato	Review ID:	5-130040-4	[[] [[] [[] [] [] [[] [] [] [] [] [] []		li i i i di kana da ka	ior de Cui o
4306 Aikepa Str					Reviewer:	- 1000 10 1				
Lihue		ні	96766		Begin Date:	7/27/2016	End Date) :		
Foster Family	(Flome)	Re	quired <u>C</u> e	rtificațe			17-1454-6]			
6.(d)(1)	Compl	ly with a	li annlicable	FOGUIFOR	nents in this ch			the state of the second second		
Comment:				requiren	ients in this ch	apter; and				
Home visit for a items due to C	a 2 persoi TA by 8/2	n recer 7/16.	tification rev	view ma	de on 7/27/10	6. Corrective	Action Repo	rt issued d	uring home	visit with al
6.(d)(1) - see a	pplicable	section	ns of the rev	/iew						
Foster Family	Uama *									
. Saich Kamila	⊔otùe.	:kë	rsonnellan	d Staffi	ng .		[7-1454-41]·	The State of the S	· Committee	N X = E
41.(b)(7)	Have a	current	tuberculosis	clearan	ce that meets o	department of l	nealth guideline			
41.(b)(8)	Have d	ocumer	itation of curi	rent train	ing in blood bo	rne pathogen	and infection co	es; and ontrol, cardi	opulmonary	
Comment:										********
11.(b)(7) - No cı 11.(b)(8) - No cı	urrent TB urrent Blo	clearai od Bor	nce for CG : ne Pathoge	#3. n certific	cation for CG	#3.				
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Compliance Manager

Date 7/27/16

7/25/2016 21:19 PM

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41. (b) (7) - I sent CTA a current The chearance Few CG + 3 on 7/27/14.

41. (b) (8) - I sent CTA a current

Blowdborne Pathogen Centification for

CG # 3 on 7/27/16

I have placed all tems with expiration dates on my callendar, I will review every month

JESUSA SEBASTIAN

7/27/16